

FILE COPY

STATE OF MISSISSIPPI SECRETARY OF STATE ERIC CLARK

401 MISSISSIPPI STREET
POST OFFICE BOX 136
JACKSON, MISSISSIPPI 39205-0136

TELEPHONE (601) 359-1350 FACSIMILE (601) 359-1499

June 24, 2004

Ms. Peggy Sims U.S. Elections Assistance Commission 1225 New York Avenue N.W., Suite - 1100 Washington, DC 20005

RE: Help America Vote Act, SF269A Report

Dear Ms. Sims:

Please find attached the amended SF269A Report for the State of Mississippi's HAVA Election Fund.

If you have any questions, please contact Mr. Michael Boyd, Director of Elections Administration, at (601) 359-6582 or email to mboyd@sos.state.ms.us.

Thank you.

Sincerely,

ERIC CLARK
Secretary of State

Attachment

FINANCIAL STATUS REFORTGINAL (Short Form)

(Follow instructions on the back)

Federal Agency and Organizational Element to Which Report is Submitted	Federal Grant or Other Identifying Number Assigned By Federal Agency				OMB Approval No.	Page	∍ of
General Services Administration	39.011 Election Reform Payments				0348-0038	1	1 pages
Recipient Organization (Name and complete ad Mississippi Secretary of State Eric Clark	,	st Office Box 136, Ja	ackson, MS	39205	ATTN: HAVA		Ibades
Employer Identification Number 64-089-7726	5. Recipient Account Number or Identifying Number 6. Final Report 3115-HAVA Election Fund (§102) Yes V No				7. Basis Cash Accrual		
8. Funding/Grant Period <i>(See instructions)</i> From: (Month, Day, Year) 8/1/2003	To: (Month, Day, Year)	9. Period Covered by the From: (Month, Day, 8/1/2003	•		To: (Month, Day	/, Yea	ır)
10. Transactions:		I Previously Reported	ll This Perioc	Í	III Cumula	ıtive	
a. Total outlays							0.00
b. Recipient share of outlays		,			L		0.00
c. Federal share of outlays							0.00
d. Total unliquidated obligations							0.00
e. Recipient share of unliquidated obligations	3						0.00
f. Federal share of unliquidated obligations							0.00
g. Total Federal share(Sum of lines c and f)							0.00
h. Total Federal funds authorized for this funding period					1,7	 ′78,C	067.00
i. Unobligated balance of Federal funds(Line h minus line g)					1,7	78,C	067.00
a. Type of Rate (Place "X" in 11. Indirect Provision	· · · · · · · · · · · · · · · · · · ·	termined	Final		☐ Fixed		
Expense b. Rate	c. Base	d. Total Amount		e. F	ederal Share		
 Remarks: Attach any explanations deemed need legislation. 	cessary or information required	d by Federal sponsoring a	agency in comp	liance wi	th governing		
13. Certification: I certify to the best of my know			plete and that	all outia	ys and		
unliquidated obligations are for the purposes set forth in the award documents. Typed or Printed Name and Title			Telephone (Area code, number and extension)				
Eric Clark, Secretary of State, State of Mississippi			601-359-1350				
Signature of Authorized Certifying Official Clark			Date Report Submitted June 24, 2004				

6013591350



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SECRETARY OF STATE ERIC CLARK

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401 MISSISSIPPI STREET (39201)
JACKSON MISSISSIPPI 39205-0136
(Office) (601) 576-2550
(Fax) (601) 359-5019
1-800-829-6786

FINANCIAL STATUS REPORT.

(Short Form)

(Follow instructions on the back)



Federal Agency and Organizational Element to Which Report is Submitted	Federal Grant or Other Identifying Number Assigned By Federal Agency				Page of		
General Services Administration 39.011 Election Reform Payments			0348-0038	1 1 pages			
Recipient Organization (Name and complete a Mississippi Secretary of State Eric Clar	-	ost Office Box 136, Ja	ackson, MS 3920	05 ATTN: HAVA			
4. Employer Identification Number	5. Recipient Account Number or Identifying Number 6. Final Report			7. Basis			
64-089-7726	3115-HAVA Election Fund (§102)		Yes 🗸 No	☑ Cash	Accrual		
Funding/Grant Period (See Instructions) From: (Month, Day, Year) 8/1/2003	To: (Month, Day, Year)	9. Period Covered by this Report From: (Month, Day, Year) 8/1/2003		To: (Month, Day	To: (Month, Day, Year) 12/31/2003		
10. Transactions:		l Previously Reported	II This Period	III Cumula			
a. Total outlays					0.00		
b. Recipient share of outlays		,:			0.00		
c. Federal share of outlays					0.00		
d. Total unliquidated obligations					0.00		
e. Recipient share of unliquidated obligation	s			· · · · · · · · · · · · · · · · · · ·	0.00		
f. Federal share of unliquidated obligations		1000 100 100 100 100 100 100 100 100 10			0.00		
g. Total Federal share(Sum of lines c end f)					0.00		
h. Total Federal funds authorized for this funding period		San San San San San		1,7	78,067.00		
i. Unobligated balance of Federal funds/Line				1,7	78,067.00		
a. Type of Rate(Place "X" In 11. Indirect Provision		letermined	Final	Fixed			
Expense b. Rate	c. Base	d. Total Amount	e.	Federal Share			
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compilance with governing legislation.							
13. Certification: I certify to the best of my kno			plote and that all o	utlays and			
unliquidated obligations are for the purposes set forth in the award documents. Typed or Printed Name and Title			Telephone (Area code, number and extension)				
Eric Clark, Secretary of State, State of Mississippi			601-359-1350				
Signature of Authorized Certifying Official			Date Report Submitted				
Elia Cla	200		June 24, 2004				